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## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

yok 920000 812

| CLAIMS AS FILED - PART I   |  |   |                |                               |                              |                  | ,          | SMALL ENTITY        |                        |     | OTHER THAN          |                        |  |
|--|--|---|----------------|-------------------------------|------------------------------|------------------|------------|---------------------|------------------------|-----|---------------------|------------------------|--|
|  |  | <del></del>                               | (Column 1)     |                               | (Column 2)                   |                  | •          | TYPE                |                        | OR  | OR SMALL ENT        |                        |  |
| TOTAL CLAIMS   |  |   | 33             |                               |                              |                  |            | RATE                | FEE                    |     | RATE                | FEE                    |  |
| FOR  |  |   | NUMBER FILED   |                               | NUMBER EXTRA                 |                  |            | BASIC FEE           | 355.00                 | OR  | BASIC FEE           | 710.00                 |  |
| TOTAL CHARGEABLE CLAIMS  |  |   | 33 minus 20=   |                               | · 13                         |                  |            | X\$ 9=              |                        | OR  | X\$18=              | 234                    |  |
| INDEPENDENT CLAIMS   |  |   | 3 minus 3 =    |                               | 0                            |                  |            | X40=                |                        | OR  | X80= ·              |                        |  |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |   |                |                               |                              |                  |            | +135=               |                        | OR  | +270=               |                        |  |
| * If the difference in column 1 is less than zero, enter   |  |   |                |                               | r "0" in c                   | olumn 2          | Į.         | TOTAL               |                        | OR  | TOTAL               | 944                    |  |
|  | C  |   | •              |                               | -                            | OTHER            | THAN       |                     |                        |     |                     |                        |  |
|  |  | (Column 1)                                |                | (Colui                        | mn 2)                        | (Column 3)       | _          | SMALL               | ENTITY                 | OR  | SMALL               | ENTITY                 |  |
| AMENDMENT A  | ,  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY                 | PRESENT<br>EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |     | RATE                | ADDI-<br>TIONAL<br>FEE |  |
| NDW  | Total  | *   | Minus          | **                            |                              | =                |            | X\$ 9=              | ,                      | OR  | X\$18=              |                        |  |
| AME  | Independent                                    | *   | Minus          |                               |                              | =                |            | X40=                |                        | OR  | X80=                |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT C   |  |   |                |                               |                              |                  |            | +135=               |                        | OR  | +270=               |                        |  |
|  |  |   |                |                               |                              |                  |            | TOTAL               |                        | OR  | TOTAL               |                        |  |
|  |  | ,   | ADDIT. FEE     | <u> </u>                      |                              | ADDIT. FEE       |            |                     |                        |     |                     |                        |  |
|  | A September Source Control of the              | (Column 1)<br>CLAIMS                      |                | (Colu                         | mn 2)<br>IEST                | (Column 3)       | 1 6        | <u> </u>            | 4551                   | 1 1 |                     |                        |  |
| AMENDMENT B  |  | REMAINING<br>AFTER<br>AMENDMENT           |                | NUM<br>PREVI                  | IBER                         | PRESENT<br>EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |     | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *   | Minus          | **                            |                              | =                |            | X\$ 9=              |                        | OR  | X\$18=              |                        |  |
| ME   | Independent                                    | *   | Minus          | ***                           |                              | =                |            | X40=                |                        | OR  | X80=                |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                |                               |                              |                  |            |                     |                        |     |                     |                        |  |
|  |  |   |                |                               |                              |                  |            | +135=               |                        | OR  | +270=               |                        |  |
|  |  |   |                |                               |                              |                  |            | TOTAL<br>ADDIT. FEE |                        | OR  | TOTAL<br>ADDIT. FEE |                        |  |
| (Column 1) (Column 2) (Column 3)   |  |   |                |                               |                              |                  |            |                     |                        |     |                     |                        |  |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                | HIGH<br>NUM<br>PREVI          | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA |            | RATE                | ADDI-<br>TIONAL<br>FEE |     | RATE                | ADDI-<br>TIONAL<br>FEE |  |
| NDN  | Total  | *   | Minus          | **                            |                              | =                |            | X\$ 9=              |                        | OR  | X\$18=              |                        |  |
| AME  | Independent                                    | •   | Minus          | ***                           |                              | =                | ]          | X40=                |                        | OR  | X80=                |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                |                               |                              |                  | <b>』</b> ┟ |                     |                        |     |                     |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  |  |   |                |                               |                              |                  |            |                     |                        | OR  | +270=               |                        |  |
| **   | If the "Highest Nu                             | mber Previously Pa                        | aid For" IN TH | S SPACE                       | is less tha                  | n 20, enter "20. | . ,        | TOTAL<br>ADDIT. FEE |                        | OR  | TOTAL<br>ADDIT. FEE |                        |  |
| ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |                |                               |                              |                  |            |                     |                        |     |                     |                        |  |